

# Work Order ID 67035

Thursday, March 03, 2011 3:10:56 PM



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Item ID: D205-634-011

Accept



Setup Start



Revision ID:

Item Name: Skidtube

Stop



Start Date: 3/3/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 3/18/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan:

*[Signature]*

Date: 11-03-3

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

IIN D205-634

Rev F

100

0.00



DC

0.00

Document Control

Memo

Photocopy bluefile & type labels per PPP D205-634-011

CHG 008457

(weiden)

*Silvestro*

*H. G. CL 11-5-11*

110

Pick Kit

0.00



Packaging

Memo

0.00

Packaging

*11/5/11*

120

QC4- 100% Inspect kits for completeness

0.00



QC

Memo

0.00

Quality Control

*Silvestro*

*(CL)*

*68.701*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Work Order ID 67035

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Item ID: D205-634-011

Accept



Setup Start



Revision ID:

Item Name: Skidtube

Stop



Start Date: 3/3/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 3/18/2011 Req'd Qty: 1.00



Customer:

Reference:

Run Start



Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D205-634-011								
	Location: _____								
	PPP rev: _____								
140	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

*11/5/16*

*11/5/16*

*MF 11-05-16*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

Thursday, March 03, 2011 3:11:03 PM

Page 1

Work Order ID: 67035

Parent Item: D205-634-011

Parent Item Name: Skidtube



Start Date: 3/3/2011

Required Date: 3/18/2011

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:P 02.08.28 Removed QC5 from Step 5 KJ  
IPP Rev:Q 08-08-12 now @ chg 006 (DSI 9417) DD verf:EC  
IPP Rev R 09.01.28 now chg 007 DSI9417 revB EC verf:DD IPP Rev:S  
10.12.01 as per chg008 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D205-634-041

Manufactured

No

110

Each

0.0000

1

1



Replacement Skidtube

K10003

Manufactured

No

110

Each

3.0000

1

1



Saddle, D205-634-011

68701

66189

Location

Loc Qty

Loc Code

PKG

3

57963

0

62888

1

64088

2

*W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries